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STATISTICAL INFORMATION ONLY: Debtor must select the number of each of the following items included in the Plan.

1 Valuation of Security

**0** Assumption of Executory Contract or Unexpired Lease

**0** Lien Avoidance

Last revised: August 1, 2020

## UNITED STATES BANKRUPTCY COURT District of New Jersey

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                               | District of                                                                                                                                                                                                                                                               | New Jersey                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                               |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| In Re:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Richard A Daniels                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                           | Case No.:                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 22-10442                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                               | Debtor(s)                                                                                                                                                                                                                                                                 | Judge:                                                                                                                                                                                                                      | -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                               |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                               | CHAPTER 13 PLA                                                                                                                                                                                                                                                            | AN AND MOTION                                                                                                                                                                                                               | S                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                               |
| <ul><li>✓ Origina</li><li>✓ Motions</li></ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | l<br>s Included                                                                                                                                                                                                                                               | <ul><li>☐ Modified/Notice I</li><li>☐ Modified/No Noti</li></ul>                                                                                                                                                                                                          | •                                                                                                                                                                                                                           | Date:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 2/14/2022                                                                                                                                                                                                                                                                                     |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                               | HE DEBTOR HAS FILE<br>CHAPTER 13 OF THE                                                                                                                                                                                                                                   |                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                               |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                               | YOUR RIGHTS MA                                                                                                                                                                                                                                                            | AY BE AFFECTE                                                                                                                                                                                                               | D                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                               |
| contains the Plan proposition of the Plan proposition of the Plan proposition of the Plan prosecute Plan proposition Plan Plan proposition Plan Plan Plan Plan Plan Plan Plan Pla | ne date of the confirmations of the Debtor to a ney. Anyone who wishes tection within the time for duced, modified, or elimated by the Bankruptcy Rule 301 on may take place sole avoid or modify the lier a lien based on value contest said treatment same. | adjust debts. You shoull es to oppose any provisition frame stated in the <i>Notion</i> minated. This Plan may further notice or hearing confirm this plan, if 5. If this plan includes by within the chapter 13 not the collateral or to recommust file a timely object. | n proposed by the d read these papersion of this Plan of the Plan of the Confirmed and g, unless written of there are no time motions to avoid of confirmation profile a separate moduce the interest retion and appear and | e Debtor. The present of the present | is document is the actual and discuss them with included in it must file a ed by this plan. Your claim nding, and included iled before the deadline tions, without further en, the lien avoidance or an confirmation order resary proceeding to avoic ted lien creditor who nation hearing to |
| state who                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ether the plan include                                                                                                                                                                                                                                        | of particular importances each of the followir<br>provision will be ineffe                                                                                                                                                                                                | ng items. If an ite                                                                                                                                                                                                         | m is check                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ed as "Does Not" or if                                                                                                                                                                                                                                                                        |
| THIS PLA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | N:                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                               |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | DOES NOT CONTA                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                           | PROVISIONS. NO                                                                                                                                                                                                              | ON-STANDA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | ARD PROVISIONS MUST                                                                                                                                                                                                                                                                           |
| COLLATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | ERAL, WHICH MAY RE                                                                                                                                                                                                                                            | THE AMOUNT OF A SE<br>ESULT IN A PARTIAL I<br>OTIONS SET FORTH                                                                                                                                                                                                            | PAYMENT OR N                                                                                                                                                                                                                | O PAYMENT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                               |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                               | A JUDICIAL LIEN OR<br>OTIONS SET FORTH I                                                                                                                                                                                                                                  |                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | JRCHASE-MONEY                                                                                                                                                                                                                                                                                 |

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| Initial De                   | ebtor(s)'          | Attorney                     | ABF Ir                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | nitial Debtor:                                | RAD                          | Initial Co-Debi | ior                                                |
|------------------------------|--------------------|------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|------------------------------|-----------------|----------------------------------------------------|
| Part 1:                      | Payme              | nt and L                     | ength of Plan                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                               |                              |                 |                                                    |
| a<br>approxin                |                    |                              | all pay <u>450.00 Mor</u><br>s.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | to the Ch                                     | napter 13 Trustee,           | starting on 2/1 |                                                    |
| b                            | The c              | <b>y</b> Fι                  | all make plan payr<br>Iture Earnings<br>her sources of fun                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                               |                              | -               | :<br>unds are available):                          |
| С                            | . Use o            | Sa<br>De                     | operty to satisfy pla<br>ale of real property<br>escription:<br>oposed date for co                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                               |                              |                 |                                                    |
|                              |                    | De                           | efinance of real pro<br>escription:<br>oposed date for co                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                               |                              |                 |                                                    |
|                              |                    | De                           | ean modification wi<br>escription:<br>oposed date for co                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | •                                             | nortgage encumbe             | ering property: |                                                    |
| d<br>e                       |                    | lo                           | ne regular monthly<br>an modification.<br>her information tha                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                               |                              |                 |                                                    |
|                              | . Adeq             | uate pro                     | ection payments w                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | vill be made in                               |                              | to be paid to   | the Chapter 13                                     |
| b<br>debtor(s                | . Adeq<br>) outsid | uate pro<br>e the Pla        | re-confirmation to rection payments with no payments with no pre-confirmation (Including Admir                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | vill be made in<br>n to: (cred                | the amount of \$_<br>ditor). | to be paid di   | rectly by the                                      |
|                              |                    |                              | claims will be paid                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | -                                             |                              | es otherwise:   |                                                    |
| Creditor Chapter 1 Law Offic |                    |                              | e<br>berg, LLC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Type of Priority Trustee Comm Attorney fees 8 | issions                      |                 | Amount to be Paid<br>to be determined<br>\$3567.00 |
| CI<br>•<br>a                 | heck on None The a | e:<br>llowed p<br>d to or is | Obligations assignation of the control of the contr | below are bas                                 | sed on a domestic            | support obligat |                                                    |

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|                                                                            |                                           |                                                                                    | Documen                                                                               | it Page 3 of                                                                                       | f 6                                                                               |                                                                                   |                                                                  |
|----------------------------------------------------------------------------|-------------------------------------------|------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|------------------------------------------------------------------|
| Creditor                                                                   |                                           | Type of Pr                                                                         | iority                                                                                | Claim Amo                                                                                          | unt                                                                               | Amount to                                                                         | be Paid                                                          |
| Part 4: Secured                                                            | Claims                                    |                                                                                    |                                                                                       |                                                                                                    |                                                                                   |                                                                                   |                                                                  |
|                                                                            |                                           |                                                                                    |                                                                                       |                                                                                                    |                                                                                   |                                                                                   |                                                                  |
| a. Curing Defau                                                            | ult and N                                 | laintaining P                                                                      | Payments on                                                                           | Principal Resi                                                                                     | idence: 🕢                                                                         | NONE                                                                              |                                                                  |
| The Deb                                                                    | otor will p                               | ay to the Tru                                                                      | stee (as part                                                                         | of the Plan) allo                                                                                  | wed claim                                                                         | s for arrearages                                                                  | on monthly                                                       |
| obligations and t                                                          | he debto                                  | r shall pay di                                                                     |                                                                                       |                                                                                                    |                                                                                   |                                                                                   |                                                                  |
| bankruptcy filing                                                          | as follow                                 | /S:                                                                                |                                                                                       |                                                                                                    | Interest                                                                          | Amount to be Paid                                                                 | Regular Monthly                                                  |
| Creditor                                                                   |                                           | Collateral or Ty                                                                   | ne of Debt                                                                            | Arrearage                                                                                          | Rate on                                                                           | to Creditor (In<br>Plan)                                                          |                                                                  |
| <u> </u>                                                                   |                                           | Conditional of Ty                                                                  | po or Bobt                                                                            | / wroarago                                                                                         | Arrearage                                                                         | Fidii)                                                                            | Fiaii                                                            |
| b. Curing and N<br>NONE                                                    | Maintain                                  | ing Payment                                                                        | s on Non-Pr                                                                           | incipal Resider                                                                                    | nce & othe                                                                        | r loans or rent a                                                                 | arrears: ✓                                                       |
| The Debtor will pand the debtor will filling as follows:                   |                                           |                                                                                    |                                                                                       |                                                                                                    |                                                                                   |                                                                                   |                                                                  |
| Creditor                                                                   |                                           | Collateral or Ty                                                                   | pe of Debt                                                                            | Arrearage                                                                                          | Interest<br>Rate on<br>Arrearage                                                  | Amount to be Paid<br>to Creditor (In<br>Plan)                                     | Regular Monthly<br>Payment (Outside<br>Plan)                     |
| JPMCB Auto Financ                                                          | ce                                        | 2017 Ford Exp                                                                      | lorer                                                                                 | \$1,500.00                                                                                         |                                                                                   | \$1,500.00                                                                        | \$430.00                                                         |
| c. Secured clain The following cla purchase money within one year o value: | aims were                                 | e either incurr<br>interest in a                                                   | red within 910<br>motor vehicle                                                       | days before the acquired for the                                                                   | e personal                                                                        | use of the debto                                                                  | or(s), or incurred                                               |
|                                                                            |                                           |                                                                                    |                                                                                       |                                                                                                    | Amount of                                                                         |                                                                                   | aid through the Plar<br>Interest Calculation                     |
| Name of Creditor                                                           |                                           | Collateral                                                                         |                                                                                       | Interest Rate                                                                                      |                                                                                   | including                                                                         | interest Calculation                                             |
| •                                                                          | debtor vasecured cointerest and claim. If | alues collater<br>reditor shall t<br>is stated. The<br>a secured cla<br>OTE: A mod | ral as indicate pe paid the are portion of ar aim is identification under motion to b | ed below. If the omount listed as my allowed claim ed as having "Need this section e filed under S | claim may<br>the "Value<br>In that exce<br>IO VALUE"<br>IN ALSO RE<br>Section 7 o | eds that value she it shall be treated.  EQUIRES f the Plan.  Value of Creditor A | er Section Interest in Inall be treated Inall as an Innual Total |
| Creditor                                                                   | Collate                                   | ral                                                                                | Scheduled<br>Debt                                                                     | Collateral<br>Value                                                                                | Superior<br>Liens                                                                 | Interest in Collateral                                                            | terest Amount to<br>Rate Be Paid                                 |

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|                                       | ere the Debtor ret<br>d claim shall disc                                    |                                                  |                     |             | Plan, paym     | ent of the fu             | ıll amount    | of the               |
|---------------------------------------|-----------------------------------------------------------------------------|--------------------------------------------------|---------------------|-------------|----------------|---------------------------|---------------|----------------------|
| •                                     | NONE onfirmation, the sider 11 U.S.C 130                                    | •                                                |                     |             |                | •                         |               | ` '                  |
| Creditor                              |                                                                             | Collateral to I                                  | e Surrendere        | b           | Value of       | Surrendered<br>Collateral | Remaini       | ng Unsecured<br>Debt |
| The <u>Creditor</u> : Mr. Coop        | ims Unaffected following secured er (residential mortg                      | d claims are<br>age)                             | unaffected          | ·           | NE             | otal Amount to            | ho Poid thr   | ough the Plan        |
| Creditor                              |                                                                             | Collatera                                        | I                   |             | 1              | otal Amount to            | be Paid thi   | bugh the Plan        |
| <b>₽</b>                              | Pro Rata                                                                    | nan \$ <u>100%</u><br>nan perc<br>distribution f | ent<br>rom any ren  | filed/non-d | lisputed claim | <b>s</b> _ to be dis      |               | ro rata              |
| Creditor                              | arately classified                                                          |                                                  | arate Classific     |             | Treatment      | /S:                       | Amo           | unt to be Paid       |
| (NOTE:<br>non-residential<br>All exec | See time limitation real property least utory contracts a wing, which are a | ons set forth<br>ses in this P<br>nd unexpire    | in 11 U.S.C<br>an.) |             | 4) that may    |                           | ·             |                      |
| Creditor                              | Arrears to be Cure                                                          |                                                  | e of Contract of    | or Lease    | Treatment by   | / Debtor                  | Post-Petitio  | n Pavment            |
|                                       | Plan                                                                        |                                                  |                     | . 20000     | Trodution b    | , 200.01                  | . 551 1 01110 |                      |
| Part 7: Motion                        | s NONE                                                                      |                                                  |                     |             |                |                           |               |                      |
|                                       | s containing me                                                             |                                                  |                     |             |                |                           |               |                      |

4

3015-1. A Certification of Service, Notice of Chapter 13 Plan Transmittal and valuation must be filed

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|                   | otion to Avoid<br>Debtor moves to |               |                   |                           |                |                                                   |                                                      |                                               |
|-------------------|-----------------------------------|---------------|-------------------|---------------------------|----------------|---------------------------------------------------|------------------------------------------------------|-----------------------------------------------|
| Creditor          | Nature of<br>Collateral           | Type of Lier  | n Amount o        |                           | ue of Cla      | unt of O                                          | Sum of All<br>Other Liens<br>Against the<br>Property | Amount of Lien to be Avoided                  |
| <b>NONE</b> The D | Debtor moves to                   | reclassify t  | -                 |                           |                |                                                   |                                                      | <del>, _</del>                                |
| consistent wi     | th Part 4 above                   |               |                   |                           |                |                                                   |                                                      |                                               |
| Creditor          | Collateral                        |               | Scheduled<br>Debt | Total Collateral<br>Value | Superior Liens | Value of<br>Creditor's<br>Interest i<br>Collatera | s<br>in                                              | Total Amount of<br>Lien to be<br>Reclassified |
| Partially Uns     | _                                 | NE            |                   |                           |                |                                                   |                                                      |                                               |
|                   | Debtor moves to on collateral cor | nsistent with |                   | Total Collatera           | ,<br>          | d and part be Deemed Secured                      | 1                                                    | Amount to be<br>Reclassified as<br>Unsecured  |
| to void liens o   | on collateral cor                 | sistent with  | n Part 4 abo      | ove:                      | ,<br>          | be Deemed                                         | 1                                                    | Amount to be Reclassified as                  |

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| The Standing Trustee ☑ is, ☐ is not auth Section 1305(a) in the amount filed by the post-p        | orized to pay post-petition claims filed pursuant to 11 U.S.C. petition claimant.                                                                                                                 |
|---------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Part 0. Modification YNONE                                                                        |                                                                                                                                                                                                   |
| Part 9: Modification X NONE                                                                       |                                                                                                                                                                                                   |
| be served in accordance with D.N.J. LBR 301                                                       |                                                                                                                                                                                                   |
| Date of Plan being modified:                                                                      | d in this case, complete the information below.                                                                                                                                                   |
| Explain below <b>why</b> the plan is being modified:                                              | Explain below <b>how</b> the plan is being modified:                                                                                                                                              |
| , p g g g                                                                                         |                                                                                                                                                                                                   |
| Are Schedules I and J being filed simultaneously  Part 10: Non-Standard Provision(s): Signatu     |                                                                                                                                                                                                   |
| <ul><li>✓ NONE</li><li>☐ Explain here:</li><li>Any non-standard provisions placed elsew</li></ul> | where in this plan are ineffective.                                                                                                                                                               |
| Signatures                                                                                        |                                                                                                                                                                                                   |
| The Debtor(s) and the attorney for the Debtor(s),                                                 |                                                                                                                                                                                                   |
|                                                                                                   | <ul> <li>if not represented by an attorney, or the attorney for the<br/>provisions in this Chapter 13 Plan are identical to Local Form,<br/>n-standard provisions included in Part 10.</li> </ul> |
| I certify under penalty of perjury that the above is                                              | true.                                                                                                                                                                                             |
| Date: February 14, 2022                                                                           | /s/ Richard A Daniels                                                                                                                                                                             |
|                                                                                                   | Richard A Daniels                                                                                                                                                                                 |
| Date:                                                                                             | Debtor                                                                                                                                                                                            |
|                                                                                                   | Joint Debtor                                                                                                                                                                                      |
| Date February 14, 2022                                                                            | /s/ Andrew B. Finberg                                                                                                                                                                             |
|                                                                                                   | Andrew B. Finberg                                                                                                                                                                                 |
|                                                                                                   | Attorney for the Debtor(s)                                                                                                                                                                        |